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					L. TTO DUTY DO OVET NO. I		
APPLICATION NO.	FILING DATE	FIRST NAMED I			ATTORNEY DOCKET NO.	CONFIRMATION NO. 4658	
10/731,117							
TITLE OF INVENTION: JO	OINT FOR TUBULAR CAB	LE COVER					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	s)210 1400		\$300	\$1670 1700	03/03/2005	
EXAM	ART UNIT		CLASS-SUBCLASS]			
ESTRADA, ANGEL R				174-049000			
CFR 1.363). Change of correspond Address form PTO/SB/12	e address or indication of "Foliance address (or Change of 022) attached. ion (or "Fee Address" Indicator more recent) attached. Use	Correspondence (tion form region of a Customer 2	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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Please check the appropriate	assignee category or catego	ries (will not be printe	d on the pat	tent): 🗖 Individual 🐯 (Corporation or other private gro	oup entity Government	
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a. Applicant claims S	(from status indicated above MALL ENTITY status. See	2) 37 CFR 1.27.	b. Applicar	nt is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).	
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